

Application No. 10/615,050 July 7, 2003 Filing Date (to be used for all correspondence after initial filing) First Named Inventor Sean S. Eilert **Art Unit** 2187 **Examiner Name** Nguyen, Hiep T. Total Number of Pages in This Submission 24 Attorney Docket Number 42P15837 (check all that apply) **ENCLOSURES** After Allowance Communication to TC Fee Transmittal Form Drawing(s) Appeal Communication to Board of Appeals and Interferences Fee Attached Licensing-related Papers Appeal Communication to TC Amendment / Response Petition (Appeal Notice, Brief, Reply Brief) Petition to Convert a Provisional Application After Final Proprietary Information Affidavits/declaration(s) Power of Attorney, Revocation Change of Correspondence Address Status Letter Extension of Time Request Other Enclosure(s) **Terminal Disclaimer** (please identify below): **Express Abandonment Request** Request for Refund Replacement Sheet Figure 1 Information Disclosure Statement and Figure 2 (1 page). PTO/SB/08 CD, Number of CD(s) Certified Copy of Priority Document(s) Landscape Table on CD Response to Missing Parts/ Incomplete Application Remarks Basic Filing Fee Declaration/POA Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Michael A. Bernadicou, Reg. No. 35,934 Individual name BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP Signature Ø Date **CERTIFICATE OF MAILING/TRANSMISSION** I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. Typed or printed name Carla Vignola

Date

Signature



FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

_ App	licant clain	s small en	tity status.	See 37	CFR 1.27
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TOTAL AMOUNT OF PAYMENT (\$) 120.00

Complete if Known				
Application Number	10/615,050			
Filing Date	July 7, 2003			
First Named Inventor	Sean S. Eilert			
Examiner Name	Nguyen, Hiep T.			
Art Unit	2187			
Attorney Docket No.	42P15837			

Check Credit card Money Order None Other (please identify):	METHOD OF PAYMENT (check all that apply)						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below, except fee Charge fee(s) indicated feet Charge fee(s) indicated feet Charge fee(s) indi	★ Check						
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